

## **BERKELEY COUNTY PLANNING AND ZONING**

1003 Highway 52 ● P.O. Box 6122 Moncks Corner, SC 29461-6120

## APPLICATION FOR REZONING

BERKELEY COUNTY ZONING ORDINANCE NO. 01-8-35, AS AMENDED

GENERAL INFORMATION:							
OWNER'S NAME(s):							
MAILING ADDRESS:							
PHONE	HOME:			MOBILE:			
EMAIL:							
NAME OF APPLICANT (IF DIFFERENT FROM OWNER):							
MAILING ADDRESS:							
PHONE	HOME:			MOBILE:			
EMAIL:							
PLEASE INDICATE THE PREFERRED METHOD OF CONTACT:							
☐ EMAIL ☐ HOME PHONE		] HOME PHONE	☐ MOBILE PHONE		☐ MAILING ADDRESS		
PROPERTY INFORMATION:							
PARCEL NUMBER(S) (TMS):							
PHYSICAL LOCATION OF SUBJECT PARCEL(S):							
PRESENT ZONING CLASSIFICATION:							
REQUESTED ZONING CLASSIFICATION:							
REASON FOR REQUEST:							
-							

BERKELEY COUNTY COMPREH	ENSIVE PLAN CONSIDERATIONS:					
Future Land Use Map Recommendation(s):						
Is the subject parcel(s) located within the Principal Growth Area (PGA)? $\Box$ Yes $\Box$ No						
If you selected <u>NO</u> to the above, please indicate whether or not your intended use will require the extension of water/sewer infrastructure or facilities (including, the establishmen of a community sewage system). Please note that the installation of individual septic systems or private wells is not considered "infrastructure extension".						
$\square$ <b>YES</b> , my project will require the extension of water/sewer infrastructure.						
$\square$ <b>NO</b> , my project will be served by private well/septic or existing water/sewer utilities.						
If <u>YES</u> , please explain:						
THE FOLLOWING INFORMATION MUST BE SUBMITTED WITH THIS APPLICATION:						
1. RECORDED PLAT - A copy of the most current recorded plat (8x11) archived at the Register of Deeds (ROD), depicting the Conceptual Site Plan if available. The Conceptual Site Plan should show ALL existing and proposed buildings, roads, driveways, parking spaces, fences, etc., in relation to the intended use.) Where only a portion of a parcel is subject to rezoning, a preliminary subdivision plat shall be submitted along with this application. In such case, the subdivision plat is required to be approved and recorded before the requested rezoning can progress to third (3 <sup>rd</sup> ) reading by County Council.						
2. \$250.00 NON-REFUNDABLE APPLICATION FEE - (MAKE CHECK PAYABLE TO "BERKELEY COUNTY")						
ACKNOWLEDGEMENT:						
I, the Applicant, hereby acknowledge by my signature that this application is complete and accurate, and I am the owner of the subject property or the authorized representative of the owner(s). I authorize the subject property to be posted and/or inspected. I further acknowledge that all fees are non-refundable.						
PRINTED NAME OF APPLICANT	DATE					
SIGNATURE OF APPLICANT	DATE					

For assistance fulling out this form, please contact the Planning Department at 843.719.4095

Last revised on 12.29.16